

## INFECTIOUS DISEASES AND FIRST AID

First aid responders need more than good intentions and a little training. They must be mindful of the wellbeing of the person they are helping and of their own; they must know how to help without contracting or spreading an infectious disease. Simply put: you can't be too careful.

OSHA'S Best Practices Guide, "Fundamentals of a Workplace First Aid Program" states,

"The training program should include instruction or discussion in the following: Learning the importance of universal precautions and body substance isolation to provide protection from bloodborne pathogens and other potentially infectious materials. Learning about personal protective equipment – gloves, eye protection, masks and respiratory barrier devices. Appropriate management and disposal of blood contaminated sharps and surfaces; and awareness of OSHA's Bloodborne Pathogen Standard."<sup>1</sup>

"Under universal precautions, blood and certain body fluids of all patients are considered potentially infectious for HIV, HBV and other bloodborne pathogens"<sup>2</sup>

A first aid responder must use reasonable and prudent precautions, which in today's world include treating all body fluids of all patients as potentially infectious and using protective barriers, such as gloves, gown, aprons, masks or protective eyewear to reduce the risk of exposure. First aid providers must also take precautions to prevent injuries from needles, scalpels and other sharp instruments and objects.

Although urine, feces, sputum, sweat and tears are not deemed potentially infectious unless they contain visible blood, an aid giver's common sense concern for hygiene would mandate their use of protective barriers if in contact with these fluids.



The following may serve as a convenient check-list for first-aid givers and their employers of equipment that should be standard in an organization's first aid kit.

- **Gloves** should be worn for touching blood and body fluids, the mucous membranes or non-intact skin of any patient and for the handling of items or surfaces soiled with blood or body fluids. (The mucous membranes are the warm and moist surfaces of the body, such as the inside of the mouth.)
  - First aid givers should have gloves that fit.
  - Because some providers will have allergies to latex, nitrile gloves should also be provided. So should non-powdered gloves, as some providers may be allergic to the powder coating in many gloves.
  - Upon removal of gloves, all providers should wash their hands immediately with soap and warm water. All disposable items should be placed in a red, plastic, leak-proof bag marked with the biohazard logo.



- **Masks and protective eyewear** or face shields should be worn to prevent exposure of providers' mucous membranes (eyes, nose and mouth) from droplets of blood or body fluids. Protective eyewear should be designed to prevent exposure from the tops and sides of the eyewear.
- **Gowns** are not, in general, required by first-aid providers unless the amount of blood present makes the soaking of blood through the providers' clothing a possibility. Having such a gown available would be a good practice.
- **Respiration shields** are required for CPR and rescue breathing. Several models are available, Provide the first aid giver with a model with which she or he is comfortable.
- **Biohazard spill kits** should be available at all times to employ in the proper clean-up of a blood or body substance spill. This kit should include:
  - Disposable latex or nitrile gloves
  - Cleaning agents with chlorine or anti-biological cleaners
  - Disposable absorbent materials
  - A red, plastic, leak-proof bag with biohazard logo

Clean the spill area with warm water and detergent, then disinfectant. Mops and buckets should be rinsed with warm water and allowed to air dry. Remove, wash and disinfect reusable gloves and other contaminated clothing. Do not wash them with other items.

- **If broken glass, syringes or other sharp material** is present, it should be picked up and discarded using mechanical means such as broom and dustpan or tongs. *Do not pick these items up with gloved or bare hands.* Dispose of the objects in a puncture-proof container and in accordance with local ordinances.
- **If exposure or injury occurs** and the first aid responder is exposed to blood or other bodily fluids and/or if the responder suffers an injury from a sharp object, such as a syringe or broken glass, the responder should wash the injury or exposure site immediately with soap and warm water. If the exposure is to the mouth or eyes, the responder should rinse with copious amounts of warm water.

Report the injury immediately to management and refer the exposed responder to a physician for immediate medical evaluation. *Medical confidentiality must be maintained throughout the entire evaluation and treatment process.*

This information should be readily available to employees who may be occupationally exposed to bloodborne pathogens in your company's first aid plan and in your company's bloodborne pathogen programs.

Remember, good Samaritans must also be smart!

## CONTACTS

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<sup>1</sup> "Best Practices Guide: Fundamentals of a Workplace First-Aid Program," U.S. Department of Labor, Occupational Safety and Health Administration, 2006.

<sup>2</sup> *Universal Precautions for Prevention of Transmission of HIV and Other Bloodborne Infections Fact Sheet*, Department of Health and Human Services, Centers for Disease Control, 1996.